

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

|  |   |                        |                    |
|--|---|------------------------|--------------------|
|  |   | Application Number     | 10/006,088         |
|  |   | Filing Date            | December 5, 2001   |
|  |   | First Named Inventor   | SLIWA et al.       |
|  |   | Art Unit               | 3739               |
|  |   | Examiner Name          | Michael F. Peffley |
| Total Number of Pages in This Submission | 8 | Attorney Docket Number | 003-007-C5         |

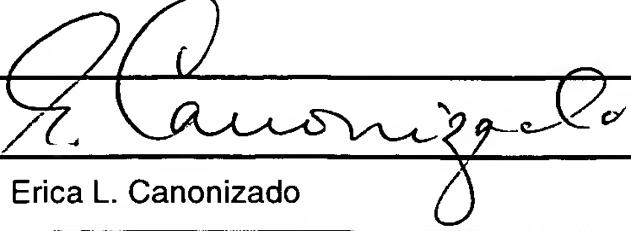
| ENCLOSURES (Check all that apply)  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form  | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to TC                             |  |
| <input type="checkbox"/> <input type="checkbox"/> Fee Attached                                     | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences      |  |
| <input checked="" type="checkbox"/> Amendment/Reply  | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  |  |
| <input type="checkbox"/> <input type="checkbox"/> After Final                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information   |  |
| <input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)                        | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter   |  |
| <input type="checkbox"/> Extension of Time Request   | <input type="checkbox"/> Terminal Disclaimer  | <input type="checkbox"/> Other Enclosure(s) (please identify below):                     |  |
| <input type="checkbox"/> Express Abandonment Request   | <input type="checkbox"/> Request for Refund   | <input type="checkbox"/> RCE transmittal Confirmation postcard                           |  |
| <input type="checkbox"/> Information Disclosure Statement  | <input type="checkbox"/> CD, Number of CD(s) _____                                      |  |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                    | <input type="checkbox"/> Landscape Table on CD  |  |  |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application                            |   |  |  |
| <input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |  |
| Remarks  |   | The Commissioner is authorized to charge any additional fees to Deposit Account 50-1247. |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |   |          |        |
|--------------|---|----------|--------|
| Signature    |  |          |        |
| Printed name | Jens E. Hoekendijk  |          |        |
| Date         | March 29, 2005  | Reg. No. | 37,149 |

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

|                       |  |      |                |
|-----------------------|--|------|----------------|
| Signature             |  |      |                |
| Typed or printed name | Erica L. Canonizado  | Date | March 29, 2005 |